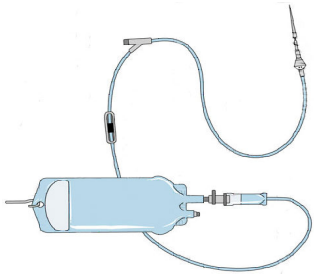


# INTRAVENOUS THERAPY

## Ethical and Legal Implications

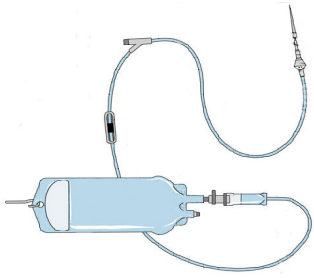
Jesmond Sharples



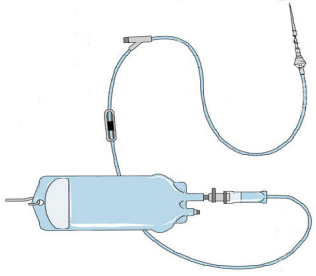


# Historical Background

- Modes & Routes of treatment – oral, intramuscular, inhalation, insufflation, rectal, topical, instillation, intrathecal etc
- Nurse's role in IV therapy began in 1960s and has expanded as a result of **increased knowledge and advances in technology**.
- Extended role of the nurse requiring certification

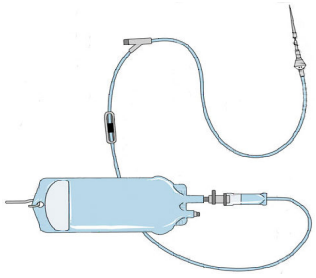


- The scope of professional nursing practice is dynamic and is always changing.
- Nursing 'is' and does not have extensions however the more complex it becomes the more vital a clear understanding of legal aspects is required to maintain professional integrity



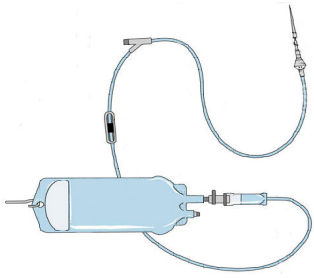
# The Legal Perspective

- **Criminal law** – seeks to establish guilt and determine punishment. A criminal offence is committed against the state and is therefore punishable by the state
- **Civil Law** – focuses on the establishment of accountability, and is directed towards an individual. Nurses might encounter civil law in relation to negligence claims as civil law involves the rights and duties of individuals towards each other.

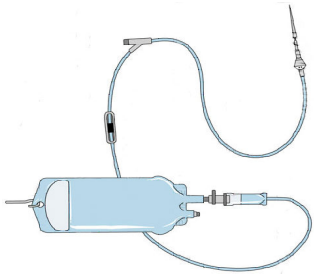


# The Legal Perspective

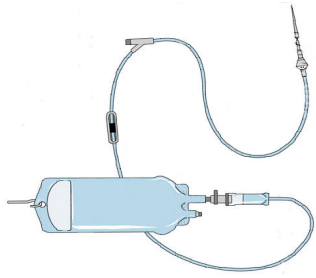
- **Case Law** – can be used to influence professional practice and is used in clinical negligence claims.
- For negligence to succeed four elements must be established - **duty to care, breach of duty, causation and injury or harm.**
- **Statute Law** – results from Parliamentary power
  - Health Care Professions Act (Cap 464). HCPA empowers the CNM to establish the code of ethical conduct and standards and guidance for nursing practice.



- The primary function of the CNM is to protect the public.
- From the point of registration nurses have the legal right to practise and use the title registered. Thereafter each and every nurse is bound by the code of conduct and code of ethics whether they are in employment or not.
- The **process of registration** is a public declaration that, as a registered nurse a standard of professional practise and conduct is expected at all times.



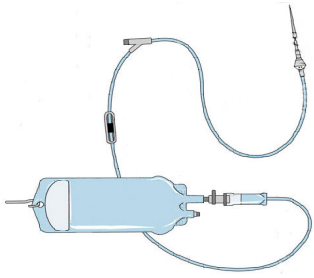
- Nurses are accountable to the patient via civil law, the public via criminal law, the profession via CNM and the employer via their contract.
- The nurse is accountable for his actions as well as decision so he must be prepared to recognise and accept all aspects of accountability as a result of registration.



# Liability and Infusion Therapy

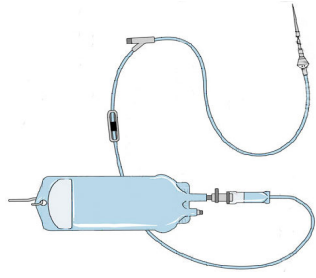
- **Negligence** – is a general term that refers to carelessness on the part of the individual. When an adult is careless or fails to act as a reasonably prudent person would act, the conduct is labelled negligent. An act of negligence includes any action or inaction that can wrong another individual or cause that person harm.





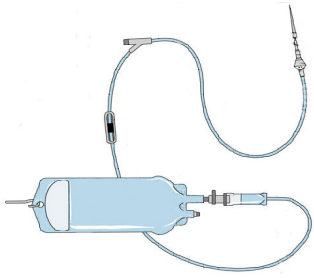
# Liability and Infusion Therapy

- **Malpractice** is negligence as it applies to professional behaviour. Malpractice is more specific than negligence because it is targeted at the professional person: one who is educated, trained, licensed or registered, and held accountable to the standards of a profession.



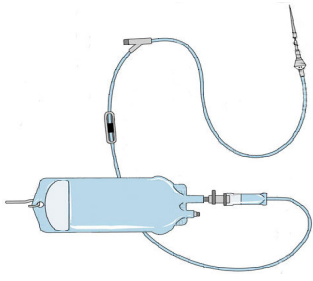
# Liability and Infusion Therapy

- **Reasonableness** is the focus that determines malpractice – the consideration whether or not the nurse acted as any reasonably prudent nurse would have acted in the same or similar situation; having the same background, education and experience.
- **Reasonableness** seeks to verify that standards of care were followed.
- **Expert witnesses** are often called upon to help determine whether the nurse acted in a reasonable manner.
- For malpractice to succeed four elements must be established - **duty to care, breach of duty, causation and injury or harm.**



# Liability and Infusion Therapy

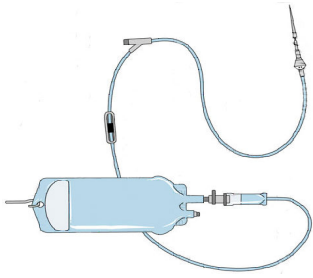
- **Duty to Care** is the initial element to be established to prove a claim of malpractice.
- A nurse has a duty to render care to an individual. To apply knowledge, experience and skill.
- The nurse is held accountable to the standards of care of the profession of nursing. Once one has been trained has a duty to care in the patient's best interest.
- **List duties** ... five R's, infection control etc



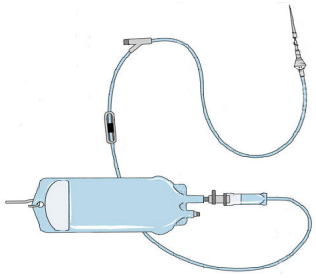
# Liability and Infusion Therapy

- **Breach of duty** is the second element to be determined to establish malpractice.
- It is the failure on the part of the nurse to carry out the duty or care owed to the patient.
- **List examples** ...inaction, wrong dose etc
- The principle of **Foreseeability**

# Liability and Infusion Therapy

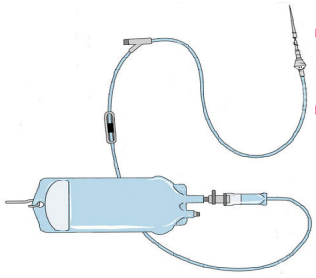


- **Foreseeability** implies the notion of cause and effect, and means that a nurse is expected to know that if something is done or not done, a particular outcome is likely to occur.
- What happens if you let a drip run? Or close it?
- In planning an implementing care the nurse must look at the possible outcomes of her actions and their effect on the patients' well being.
- Is my action going to cause harm to the patient or benefit? (**Ethical principles of beneficence and non-maleficence**).



# Liability and Infusion Therapy

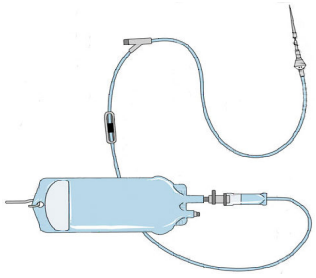
- **Causation** — 3<sup>rd</sup> component of malpractice.
- Can be difficult to prove in some situations.
- Causation means the damage or harm to the patient resulted from a breach of duty on the part of the nurse.
- The injure would not have happended if the nurse did not breach hefr duty to the patient. It must be established that the harm or oinjury to the patient was a result of a negligent action on the part of the nurse.
- Give IV KCL bolus vs IV drip with KCl. In both cases patient dies. Can you establish causation?



# Liability and Infusion Therapy

- **Injury** – the final element to be demonstrated in establishing malpractice is that of injury or harm.
- Even if negligence is demonstrated yet there is not manifest injury, malpractice cannot be established.
- Injury or harm are used interchangeably and can mean physical damages such as disability, disfigurement, pain suffering or wrongful death. Also included are loss of reputation, emotional pain and financial harm such as loss of wages (past, present and future).

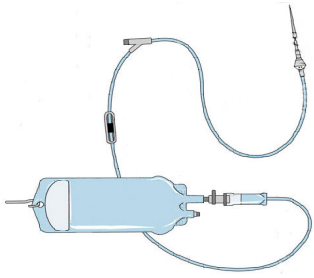
- **Examples?**



## Other issues ...

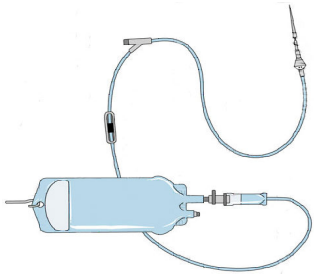
- The five R's
- Right patient
- Right medication
- Right dose
- Right route
- Right time
- Modes of double checking ...





# “Humanum est errare”

- **BEWARE OF THE HUMAN ELEMENT**
- Don't be overconfident
- Don't trust your intuition, check if in doubt
- Concentrate whilst administering medication, avoid casual talk, switch mobiles etc
- Be extra careful if you're overtired
- **REMEMBER: 2.3 ERRORS PER 100 ADMISSIONS.**



# Continuing education

- Continuing education is necessary for the nurse to remain knowledgeable and current in her skills. She is accountable to the public, to the nursing profession, and her employer to remain current in her education and her skills. Her failure to do so prepared may find her negligent in a court of law.